

#18 RTIS - *RETURN TO FMF - LOCATION 7540 CORRESPONDENCE

QUERY CONTROL FORM		RTIS USE ONLY	
Application No. <u>09 462 550</u>	Prepared by <u>AMW</u>	Tracking Number _____	
Examiner-GAU <u>V.R. KOSTAK</u> <u>-- 2611</u>	Date <u>12-19-03</u>	Week Date _____	
	No. of queries <u>1</u>		

JACKET			
a. Serial No.	f. Foreign Priority	k. Print Claim(s)	p. PTO-1449
b. Applicant(s)	g. Disclaimer	l. Print Fig.	<input checked="" type="checkbox"/> q. PTOL-85b
c. Continuing Data	h. Microfiche Appendix	m. Searched Column	r. Abstract
d. PCT	i. Title	n. PTO-270/328	s. Sheets/Figs
e. Domestic Priority	j. Claims Allowed	o. PTO-892	t. Other

SPECIFICATION	MESSAGE
a. Page Missing b. Text Continuity c. Holes through Data d. Other Missing Text e. Illegible Text f. Duplicate Text g. Brief Description h. Sequence Listing i. Appendix j. Amendments k. Other	<p><u>PTOL-85B : The issue fee paid by applicant for 09 462 550 was mistakenly credited to [REDACTED]</u></p> <p><u>09 642 550.</u></p> <p><u>Please resolve.</u></p> <p><u>Thank you.</u></p> <div style="text-align: center; margin-top: 20px;"> RECEIVED DEC 23 2004 <small>Patent Office - Washington</small> 13 </div> <div style="text-align: right; margin-top: 20px;"> initials <u>AMW</u> </div>
CLAIMS a. Claim(s) Missing b. Improper Dependency c. Duplicate Numbers d. Incorrect Numbering e. Index Disagrees f. Punctuation g. Amendments h. Bracketing i. Missing Text j. Duplicate Text k. Other	<p>RESPONSE _____</p> <p style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;"><i>Corrected</i></p> <p style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;"><i>D.I</i></p> <div style="text-align: right; margin-top: 20px;"> initials _____ </div>

PUBS Application Status Query for 09/462550[View Work Flow Content](#)

Search Another: Application Number

Class/Subclass : 345/723.000

Status : 93/NOTICE OF ALLOWANCE MAILED -- APPLICATION RECEIVED IN OFFICE OF PUBLICATIONS

Location : 7540 /PUBS - FILE MAINTENANCE FACILITY, BAILEYS X-RD, 308-6789

Charge to Location : /

Potential Issue Ready **No****Requirements** **Needed**

Drawing Required Yes

Issue Fee Required Yes

On Query No

Under Signatory Review No

PUBS Unmatched Paper No

Unmatched Petition No

Biotech No

Petition No

PCT No

Under Quality Review No

[Appln Info](#)[Contents](#)[Petition Info](#)[Atty/Agent Info](#)[Continuity Data](#)[Foreign Data](#)[Inv](#)

(To Go BACK Use BACK Button on Your BROWSER Tool Bar)

Back to [PUBS](#) | [PALM](#) | [OASIS](#) | [Home Page](#)

*NOTE : there is a "fee" in Madras
for 09/462,550, but it
was mistakenly credited to
09/642,550*

*NOW
CORRECTED*

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

Ted R. Rittmaster
FOLEY & LARDNER
Suite 3500
2029 Century Park East
Los Angeles, CA 90067-3021



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Jose Ramos	(Depositor's name)
<i>[Signature]</i>	(Signature)
December 3, 2003	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------	-------------	----------------------	---------------------	------------------

09/462,550	03/14/2000	Trevor John Burke	078986-0209	5213
------------	------------	-------------------	-------------	------

TITLE OF INVENTION: PROGRAMME GENERATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

UTILITY	YES	\$665.00		\$665.00	12/12/2003
---------	-----	----------	--	----------	------------

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

KOSTAK, VICTOR R	2611	
------------------	------	--

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 FOLEY & LARDNER
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☒ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee

☒ Advance Order - # of Copies 11

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0872 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Ted R. Rittmaster, Reg. No. 52533 December 3, 2003

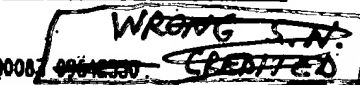
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

12/09/2003 DENYALU2 0000000 0000000

01 FC:2501
02 FC:8001



663.00 DP
3548.00
555.00 DP
33.00 DP

00000001 09465550

TRANSMIT THIS FORM WITH FEE(S)